

Accountable Care Collaborative (ACC) Phase II

Provider & Member Attribution

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February 28, 2018



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Our Mission

Improving health care access and outcomes for the **people** we serve while demonstrating sound stewardship of financial **resources**



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Agenda

- Accountable Care Collaborative (ACC) Phase II Overview
- Role of the Regional Accountable Entity (RAE)
- What is Attribution
- ACC Phase II Attribution Methodology
- Action Providers Need to Take
- Frequently Asked Questions
- Q&A through Chat



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Phase II Overview



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Goals

- To improve member health & reduce costs

Objectives

- Join physical and behavioral health under one accountable entity
- Strengthen coordination of services by advancing team-based care and health neighborhoods
- Promote member choice and engagement
- Pay providers for the increased value they deliver
- Ensure greater accountability and transparency

What is Staying the Same

- ✓ Members have choice of provider
- ✓ Physical health services will be reimbursed fee-for-service
- ✓ Behavioral health capitation will continue
 - Behavioral health providers will need to contract with RAE for reimbursement of covered services
- ✓ In most cases, members will be able to continue receiving services from their current provider

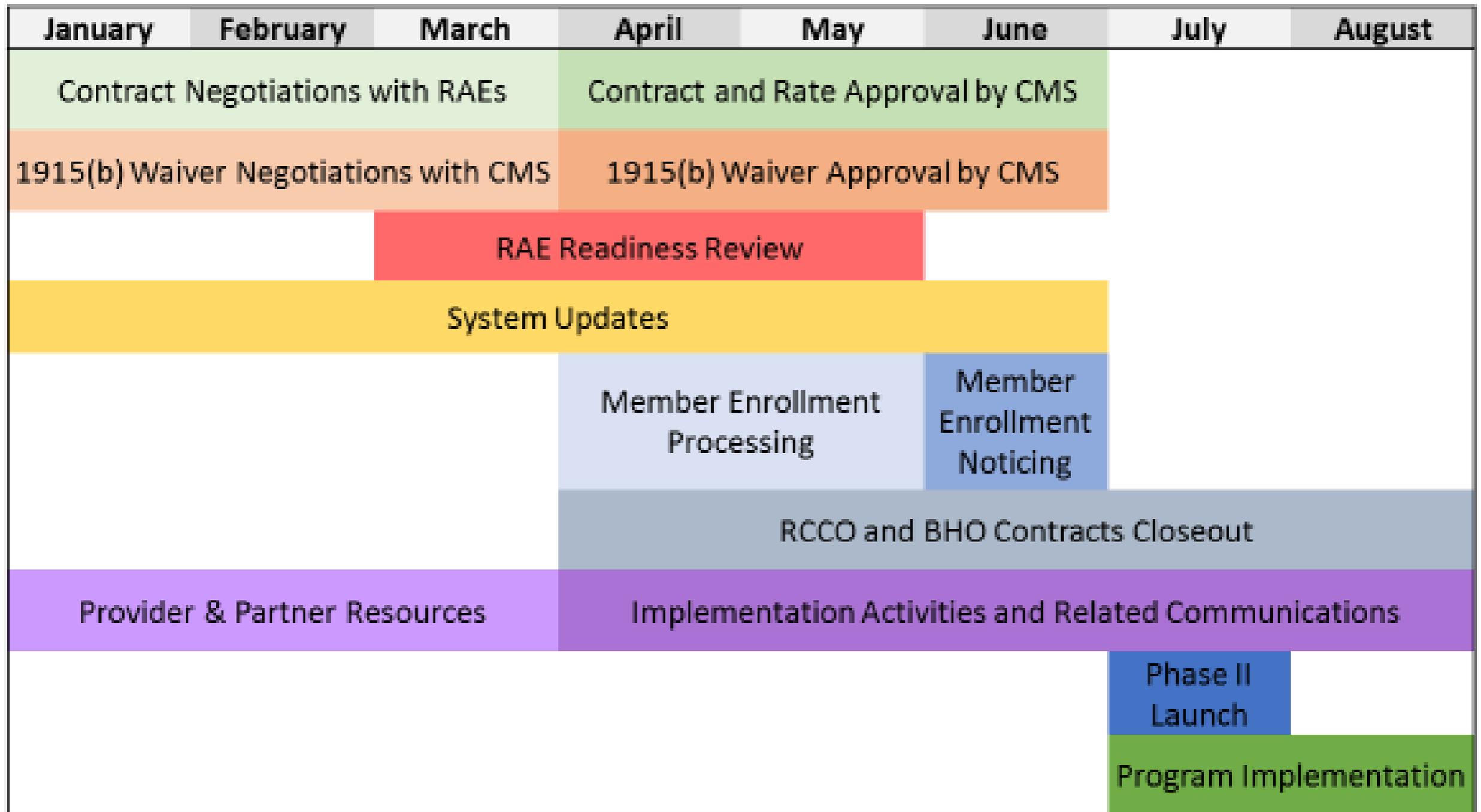


What is Changing

- There will be no Regional Collaborative Care Organizations (RCCOs) or Behavioral Health Organizations (BHOs)
 - RAEs will perform previous roles of RCCOs and BHOs
- All full-benefit members will be enrolled in ACC, except for PACE
- Geographic location of member's attributed PCMP site will determine member's assignment to a RAE
- Department will no longer directly pay PCMPs administrative Per Member Per Month or KPI incentive payments
- New federal authority



Implementation Timeline



1/9/2018



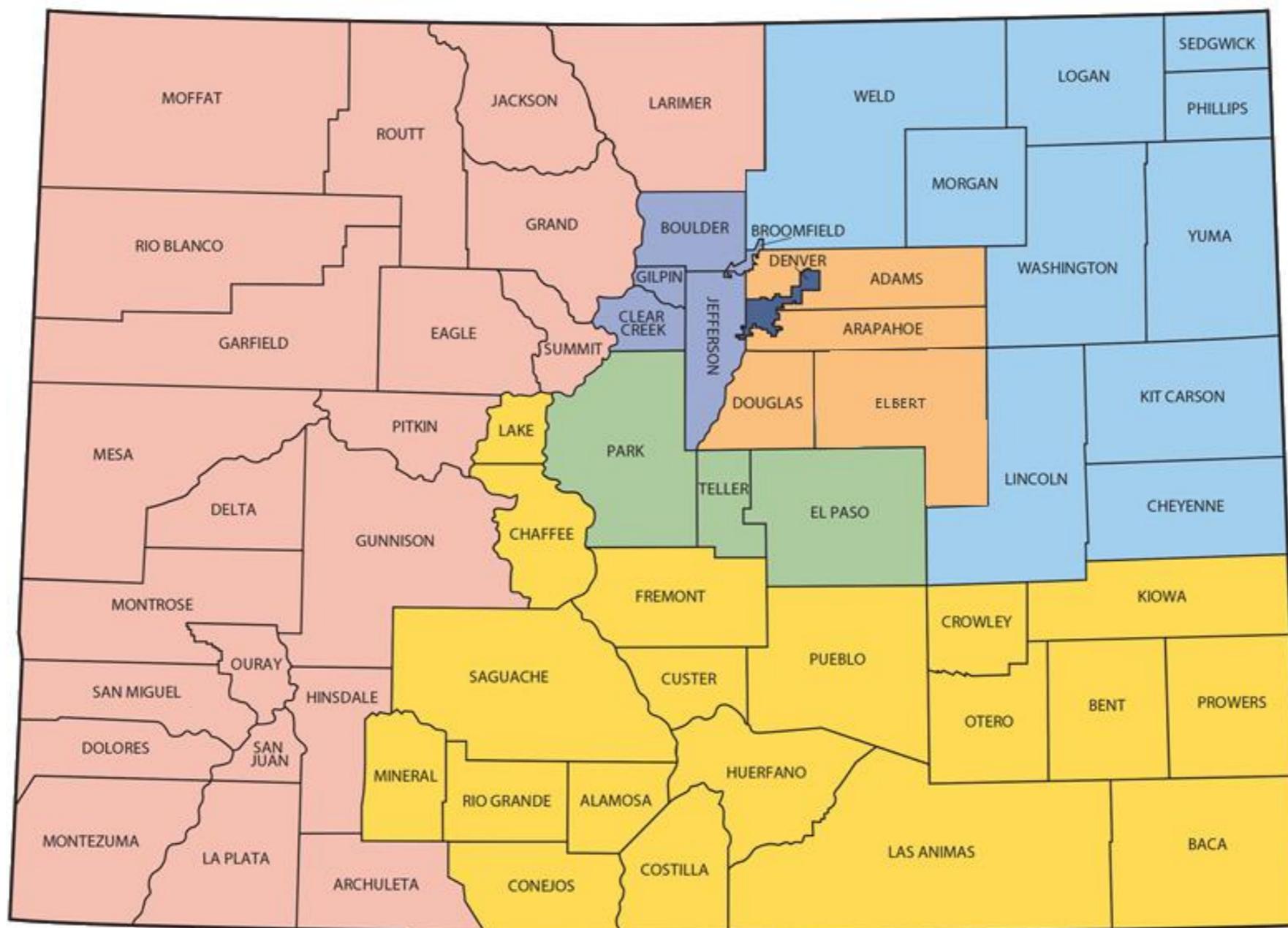
Role of Regional Accountable Entity



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Regions



- | | | | | | |
|----------|---|-----------------------------|----------|---|------------------------------------|
| Region 1 |  | Rocky Mountain Health Plans | Region 5 |  | Colorado Access |
| Region 2 |  | Northeast Health Partners | Region 6 |  | Colorado Community Health Alliance |
| Region 3 |  | Colorado Access | Region 7 |  | Colorado Community Health Alliance |
| Region 4 |  | Health Colorado, Inc. | | | |



Regional Accountable Entities

Region	Regional Accountable Entity
1	Rocky Mountain Health Plans
2	Northeast Health Partners
3	Colorado Access
4	Health Colorado, Inc.
5	Colorado Access
6	CO Community Health Alliance
7	CO Community Health Alliance

Proposals available at CO.gov/HCPFC/ACCPPhase2



Role of RAEs

Responsible for Physical and Behavioral Health

Primary Care Medical Provider (PCMP) Network

Behavioral Health Provider Network

Promote Population Health

Coordinate Care Across Disparate Providers



What is Attribution?



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Terminology

Enrollment
in the ACC

Assignment
to a RAE

Attribution
to a PCMP



Why is Attribution Important?

- Ensures all members have a medical home and focal point of care
- Determines RAE assignment
- Enables Department to track provider and RAE performance
- RAE may use it to calculate PCMP payment
- Utilized for PCMPs participating in Department's Alternative Payment Model
 - See CO.gov/hcpf/primary-care-payment-reform-3



Attribution

Current

- Members are assigned to a RCCO or BHO based on their county of residence

New

- Members are first attributed to a PCMP; RAE assignment is based on location of the member's attributed PCMP



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Phase II Attribution Methodology



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Attribution Methodology

Utilization*

Family
Connection*

Proximity*

Member Contact
with Enrollment
Broker

*Auto-attribution



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Utilization

When Used:

- Members with claims history with a provider in past 18 months

Process:

- 18 months claims history review
- Paid Evaluation and Management (E&M) claims prioritized over other types of claims
- For children up to age 21, a set of 10 preventive service codes will be prioritized
- Attribution will be determined by the provider with the majority of claims



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Family Connection

When Used

- Members with no utilization history with a PCMP

Process:

- Identify whether a family member of the member has a claims history with a PCMP
- Determine if the PCMP is appropriate
- Members will then be enrolled to the family member's PCMP



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Proximity

When Used:

- Members with no utilization history in past 18 months

Process:

- Look for PCMPs within the region covering member's county of residence
- Attribute to closest appropriate PCMP



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Member Contact with the Enrollment Broker

All members are initially attributed using:

- utilization,
- family connection, or
- proximity

Members can change their PCMP at any time by contacting the Health First Colorado enrollment broker



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Special Populations

- Children in Foster Care
- Denver Health Medicaid Choice
- Rocky Mountain Health Plan MCO



Action Providers Need to Take



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Bill by Location

- Providers with multiple service locations (sites) must enroll each location separately.
- Each claim must include the appropriate service location address
 - Claims should not use one billing address for all locations.
- It is critical providers bill by location if they want to receive attributions.

For information on how to enroll individual sites,
billing by location and more go to:
CO.gov/HCPF/Interchange-Resources



Contract with RAE

Contact your RAE to become a PCMP

- If not contracted with the RAE, you will not get attribution
- Contracted PCMPs can participate in Department's Alternative Payment Model, go to:
 - CO.gov/HCPF/primary-care-payment-reform-3



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RAE Contacts

Region	Regional Accountable Entity	Contact Information
1	Rocky Mountain Health Plans	Email: support@rmhpccommunity.org
2	Northeast Health Partners	9925 Federal Drive, Suite 100 Colorado Springs, CO 80921 Phone: 1-800-804-5040 Email: COProviderRelations@beaconhealthoptions.com
3	Colorado Access	Amber Garcia Phone: (720) 744-5487 Email: pns@coaccess.com
4	Health Colorado, Inc.	9925 Federal Drive, Suite 100 Colorado Springs, CO 80921 Phone: 1-800-804-5040 Email: COProviderRelations@beaconhealthoptions.com
5	Colorado Access	Amber Garcia Phone: (720) 744-5487 Email: pns@coaccess.com
6	CO Community Health Alliance	Phone: (303) 256-1717 (Local) (855) 627-4685 (Toll-Free) http://www.cchacares.com/about-ccha/contact-us
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Communications & Resources

January

- Implementation Process Overview

February

- Provider Contracting
- Attribution Process

March

- ACC Phase II: Overview of Key Concepts
- Behavioral Health Services in Primary Care

April

- Performance Measurement

Find resources at CO.gov/HCPF/ACCPhase2



Frequently Asked Questions



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How will attribution work for members enrolled in the ACC at the time of implementation of Phase II?



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*How are members attributed
to a specific practice
location?*



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*If a member loses eligibility,
will they be re-attributed to
the same practice?*



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Can any provider receive attributions?



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Do all providers have to go through the credentialing process? How is credentialing different than revalidation?



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Questions?



Please use the chat function to submit your question.



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More Information

CO.gov/HCPF/ACCPPhase2



Thank You!



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